



RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

16 AUG 17 PM 12:25

Dan Carter for U.S. Senate • PO Box 384 • Bethel, CT 06801

August 9, 2016

Secretary of the United States Senate
Office of Public Records
PO Box 77578
Washington DC 20013-7578

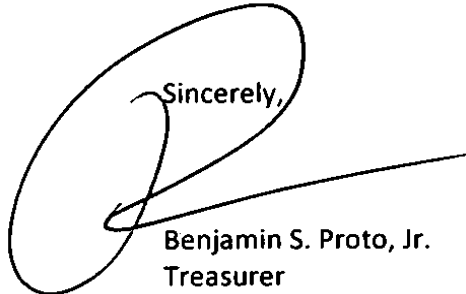
RE: Carter 2016, Amended Report of Receipts &
Disbursements, Pre Convention Report

Dear Secretary:

Enclosed please find Amended FEC Form 3 Report of Receipts and Disbursements for the above referenced US Senate Campaign Committee for the previous report for the Pre Convention period covering April 1, 2016 – April 19, 2016. Also enclosed is a self-addressed stamped envelope, please forward a stamped copy of the first page to me.

Please direct all correspondence to this office.

Thank you.

Sincerely,

Benjamin S. Proto, Jr.
Treasurer

Enc.

201608190200346330

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

16 AUG 17 PM 12:25

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Carter 2016

ADDRESS (number and street)

211 Greenwood Avenue



Check if different than previously reported. (ACC)

Bethel

CT

06801

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C 00613935

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

CT

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

05

09

2016

in the State of

CT

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

in the State of

Covering Period

04

01

2016

through

04

19

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Benjamin Proto

Signature of Treasurer

Date

08

09

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office
Use
Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

Carter 2016

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2016

To:

MM / DD / YYYY
04 / 19 / 2016

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ...	6,950.00	6,950.00
(b) Total Contribution Refunds (from Line 20(d)) ...		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ...	6,950.00	6,950.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	52.93	52.93
(b) Total Offsets to Operating Expenditures (from Line 14)...		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...	52.93	52.93
8. Cash on Hand at Close of Reporting Period (from Line 27)...	26,897.07	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ...	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ...	20,000.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Carter 2016

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2016

To:

MM / DD / YYYY
04 / 19 / 2016

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A)...

(ii) Unitemized

(iii) TOTAL of contributions
from individuals .

(b) Political Party Committees...

(c) Other Political Committees
(such as PACs)...

(d) The Candidate

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..

13. LOANS:

(a) Made or Guaranteed by the
Candidate...

(b) All Other Loans...

(c) TOTAL LOANS

(add Lines 13(a) and (b))...

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ...

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...

6,200.00

750.00

0.00

0.00

0.00

0.00

6,950.00

0.00

20,000.00

20,000.00

0.00

0.00

26,950.00

6,200.00

750.00

0.00

0.00

0.00

0.00

6,950.00

0.00

20,000.00

20,000.00

0.00

0.00

26,950.00

201608190200346333

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES...

52.93

52.93

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES ..

0.00

0.00

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed
by the Candidate...

0.00

0.00

(b) Of All Other Loans

0.00

0.00

(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b))...

0.00

0.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees...

0.00

0.00

(b) Political Party Committees...

0.00

0.00

(c) Other Political Committees
(such as PACs)...

0.00

0.00

(d) TOTAL CONTRIBUTION REFUNDS
(add Lines 20(a), (b), and (c))...

0.00

0.00

21. OTHER DISBURSEMENTS

0.00

0.00

22. TOTAL DISBURSEMENTS

(add Lines 17, 18, 19(c), 20(d), and 21) ▶

52.93

52.93

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...

0.00

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...

26,950.00

25. SUBTOTAL (add Line 23 and Line 24)...

26,950.00

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...

52.93

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD
(subtract Line 26 from Line 25)...

26,897.07

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 2

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carter 2016

Full Name (Last, First, Middle Initial)

Foley, Richard

Mailing Address

27 Crow's Nest Lane Unit 4-I

City

Danbury

State

CT

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Consultant

Receipt For:

☐ Primary ☐ General

☒ Other (specify) **Convention**

Election Cycle-to-Date

300.00

Date of Receipt

04 / 01 / 2016

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

McMahon, Linda

Mailing Address

14 Hurlingham Drive

City

Greenwich

State

CT

Zip Code

06831

FEC ID number of contributing
federal political committee.

C

Name of Employer

McMahon Enterprises

Occupation

Executive

Receipt For:

☐ Primary ☐ General

☒ Other (specify) **Convention**

Election Cycle-to-Date

2,700.00

Date of Receipt

04 / 19 / 2016

Amount of Each Receipt this Period

2,700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

McMahon, Linda

Mailing Address

14 Hurlingham Drive

City

Greenwich

State

CT

Zip Code

06831

FEC ID number of contributing
federal political committee.

C

Name of Employer

McMahon Enterprises

Occupation

Executive

Receipt For:

☒ Primary ☐ General

☐ Other (specify) **Convention**

Election Cycle-to-Date

2,700.00

Date of Receipt

04 / 19 / 2016

Amount of Each Receipt this Period

2,700.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)

5,700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 2

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Carter 2016

Full Name (Last, First, Middle Initial)

Wood, Terrie

Mailing Address

50 St. Nicholas Road

City

Darien

State

CT

Zip Code

06820

FEC ID number of contributing
federal political committee.

C

Name of Employer

State of Connecticut

Occupation

Legislator

Receipt For:

☐ Primary ☐ General

☒ Other (specify) **Convention**

Election Cycle-to-Date ▼

500.00

Date of Receipt

04 / 13 / 2016

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶

500.00

TOTAL This Period (last page this line number only) ▶

6,200.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 1

☒ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial)

A. Anedot, Inc

Mailing Address PO Box 84314

City Baton Rouge, State LA Zip Code 70884

Purpose of Disbursement
Credit Card Transaction Fee

Candidate Name
Dan Carter

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☒ Other (specify) Convention

State: District:

Date of Disbursement

04 / 13 / 2016

Amount of Each Disbursement this Period

19.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Anedot, Inc

Mailing Address PO Box 84314

City Baton Rouge, State LA Zip Code 70884

Purpose of Disbursement
Credit Card Transaction Fee

Candidate Name
Dan Carter

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☒ Other (specify) Convention

State: District:

Date of Disbursement

04 / 15 / 2016

Amount of Each Disbursement this Period

4.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Anedot, Inc

Mailing Address PO Box 84314

City Baton Rouge, State LA Zip Code 70884

Purpose of Disbursement
Credit Card Transaction Fee

Candidate Name
Dan Carter

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☒ Other (specify) Convention

State: District:

Date of Disbursement

04 / 18 / 2016

Amount of Each Disbursement this Period

4.20

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)

28.20

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 2

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Carter 2016

Full Name (Last, First, Middle Initial)

A. Anedot Inc

Mailing Address

PO Box 84314

City Baton Rouge,

LA State 70884 Zip Code

Purpose of Disbursement
Credit Card Fee

003

Candidate Name
Dan Carter

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☒ Other (specify) ▼

Convention

State: CT

District:

Date of Disbursement

04 / 19 / 2016

Amount of Each Disbursement this Period

24.73

☐ Memo Item

B.

Mailing Address

City

State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

☐ Memo Item

C.

Mailing Address

City

State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

24.73

TOTAL This Period (last page this line number only).....▶

52.93

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE OF

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full) Carter 2016

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

Election:

☐ Primary

☐ General

☒ Other (specify) Convention

Carter, Dan

Mailing Address

14 Katrina Circle

City Bethel

State CT

ZIP Code

06801

Original Amount of Loan

20,000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

20,000.0

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 04

/ 19

/ 2016

M 12

/ 31

/ 2016

0.00

% (apr)

☐ Yes

☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)...

TOTALS This Period (last page in this line only)...

20,000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C-1 (FEC Form 3)
LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
Information found on
Page ____ of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;">C</div>	
LENDING INSTITUTION (LENDER) Full Name		Amount of Loan <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Interest Rate (APR) <div style="border: 1px solid black; height: 20px; width: 100%;"></div> %
Mailing Address		Date Incurred or Established <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div></div></div>	
City	State	Zip Code	Date Due <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div></div></div>
A. Has loan been restructured? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, date originally incurred <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div></div></div>			
B. If line of credit, Amount of this Draw: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		Total Outstanding Balance: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
C. Are other parties secondarily liable for the debt incurred? <input type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Schedule C.)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the value of this collateral? <div style="border: 1px solid black; height: 20px; width: 100%;"></div> Does the lender have a perfected security interest in it? <input type="checkbox"/> No <input type="checkbox"/> Yes	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the estimated value? <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Date account established: <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div></div></div>			
Location of account: Address: _____ City, State, Zip: _____			
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name Signature		DATE <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div></div></div>	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
J. AUTHORIZED REPRESENTATIVE Typed Name Signature		DATE <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div></div></div>	
Title			

08190200346340

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE OF

FOR LINE NUMBER:
(check only one)

9
10

NAME OF COMMITTEE (In Full)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional) ...

2) TOTALS This Period (last page this line number only) ...

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

U.S. POSTAGE
PAID
STRAITFORD CT
06814
AUG 12 16
AMOUNT
\$1.57
R2305M147338 3



20013

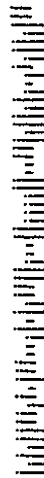


1000

SENATE
KING NUMBER

10-097939

City of The US Senate
Office of Public Records
Box 77578
Washington DC 20013-7578



United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL 8-17-16
Date of Receipt

8-12-16
Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

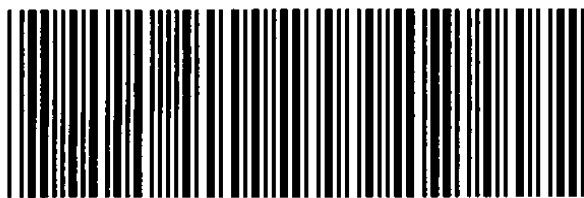
POSTMARK ILLEGIBLE ☐ NO POSTMARK ☐

FAX _____
Date of Receipt

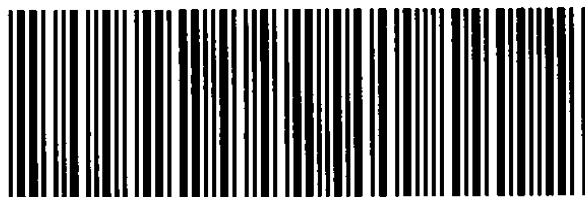
OTHER _____
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 8-17-16

SEN PATCH



SEN PATCH



201608190200346344